

## In the Claims

All of the claims standing for examination are reproduced below with current amendments marked and appropriate status indication.

1-18. (Cancelled)

19. (Currently amended) A system for developing health care business applications, comprising:

- a server coupled to a data repository;

- a software system executing on the server from a non-transitory machine-readable physical medium, the software system comprising:

- a foundation services tier (FST) providing modules with operating system functionalities including resource allocation and a scheduling function, and modules with middleware functionalities including messaging and knowledge integration, wherein all tasks that are scheduled are initiated through the scheduler function, with each defined task comprising constraints, and if the constraints cannot be satisfied within a current context, the scheduler notifies a task initiator with a precise indication of the reasons, providing Quality of Service (QoS) guarantees, and wherein user's security authorizations are managed by a Globally-Controlled Locally Managed (GCLM) system in which users are grouped into non-overlapping security domains, each managed by a security domain administrator (SDA), and users are assigned privileges defined by application designers at a lowest level of granularity;

- a domain services tier (DST) comprising a workflow software (SW) engine having specific process states, and thus having state transitions, triggered by events, all defined by an XML-based configuration mechanism of the workflow software engine, and Application Programming Interfaces (APIs) for developing the healthcare business process applications, wherein each call to an API is routed to a Quality of Service (QoS) subsystem before being executed, and QoS standards are enforced in operation of the API and any healthcare business process application implemented through the API, and

wherein the healthcare business process applications are developed for a specific healthcare enterprise, and after development are deployed to be executed at the specific enterprise by users who are associated with and granted privileges for that enterprise; and

an application service services tier (AST) comprising specific healthcare business process applications developed using the workflow software engine and APIs of the DST, the healthcare business process applications implemented using services of the workflow software engine and communicating with one another in the AST using a publish-subscribe model provided by a subscription manager, in which messages are published by individual applications without being addressed to any specific destination, and applications subscribe according to interest without regard to any specific source, and wherein in the AST all entered data is routed through a health care standards subsystem before being accepted as clinical data, thus ensuring standards compliance.

wherein the business process applications are implemented using services of a workflow engine having specific process states, and thus having state transitions, triggered by events, all defined by an XML-based configuration mechanism of the workflow engine;

wherein the healthcare business process applications communicate with one another in the AST using a publish-subscribe model provided by a subscription manager, in which messages are published by individual applications without address to any specific destination, and applications subscribe according to interest without regard to any specific source;

wherein all tasks that are to be scheduled are initiated through a scheduler function, with each defined task comprising constraints, and if the constraints cannot be satisfied within a current context, the scheduler notifies a task initiator with a precise indication of the reasons, providing Quality of Service (QoS) guarantees;

wherein each call to an API is routed to a Quality of Service (QoS) subsystem before being executed, and QoS standards are enforced in operation of the API and any healthcare business process application implemented through the API;

~~wherein, in the AST all entered data is routed through a health care standards subsystem before being accepted as clinical data, this ensuring standards compliance;~~  
~~wherein user's security authorizations are managed by a Globally Controlled Locally Managed (GCLM) system in which users are grouped into non-overlapping security domains, each managed by a security domain administrator (SDA), and users are assigned privileges defined by application designers at a lowest level of granularity; and~~  
~~wherein the healthcare business process applications are developed for a specific healthcare enterprise, and after development are deployed to be executed at the specific enterprise by users who are associated with and granted privileges for that enterprise.~~

20-25. (Cancelled )

26. (Previously presented) The system of claim 19 wherein the healthcare business process applications include applications for admission of a patient to a healthcare facility, discharge of a patient from a health care facility, transfer of a patient within a healthcare facility, billing a patient for services provided,

27. (Previously presented) The system of claim 19 wherein the healthcare business process applications include an Integrated Nursing Module (IND) providing users options to view information from various perspectives, including a Nursing Station-wise view, a Doctor-Specialty-wise view, and Ward-wise-view.

28. (Previously presented) The system of claim 27 wherein views are limited to pre-authorized users.

29. (Previously presented) The system of claim 27 wherein users are provided facility to designate a patient's clinical status to one or more of 'Under IP Care', 'Marked for Discharge', and 'Send for Billing'.